# GOVERNOR'S INTERAGENCY COORDINATING COUNCIL FOR THE PREVENTION OF ALCOHOL AND OTHER DRUG PROBLEMS GOVERNOR'S PREVENTION ADVISORY COUNCIL (GPAC) February 25, 2010 - 9:30 a.m. to 12:30 p.m.

## **MINUTES**

The twenty-ninth meeting of the Governor's Prevention Advisory Council (GPAC) was convened at 9:30 a.m., on February 25, 2010, at the California Department of Alcohol and Drug Programs (ADP). These minutes provide a summary of the discussions and the decisions made during the Council meeting.

## 1. INTRODUCTIONS AND ANNOUNCEMENTS

Chief Deputy Director Michael Cunningham opened the meeting with thanks to all Council members for their continued support of GPAC efforts in light of the status of the state's current budgetary constraints.

Two announcements were made regarding changes in participating Council members:

- Chief Jon Rodriguez will be replacing Chief Jim Mc Laughlin as the new policy representative for the California Highway Patrol.
- Diane Glaser will be replacing Beth Hoffman as the new workgroup representative on behalf of California Community Colleges.

Members introduced themselves and provided updates on prevention projects their agencies are involved in.

- Judy Sakaki, Office of the President, University of California (UC), reported that they
  have received a grant from the Department of Education to improve alcohol and drug
  education in the UC and California State University (CSU) systems.
- Christian Albrecht, Alcoholic Beverage Control (ABC), stated that developments over the last three months have focused on research into streamlining and improving enforcement efforts. Due to changes in their budget, ABC will be closing field offices throughout the state and consolidating efforts into necessary areas, reducing operating costs, and increasing personal dedication to GPAC.
- Jaime Taylor, ABC, introduced herself.
- Lt. Col. Peter Shaner, California National Guard, reported that this is his first GPAC meeting and is looking forward to integrating the National Guard's Drug Demand Reduction Program with GPAC initiatives.
- Mary Strode, Department of Public Health, Tobacco Control Section, introduced herself.
- Paul Oliaro, CSU, Office of the Chancellor, reported they have started a pilot program
  of Screening, Brief Intervention, and Referral to Treatment (SBIRT) services in CSU

campus health centers. Information collected regarding campus SBIRT services will be distributed throughout the higher education systems to inform educators of the problems with drugs and alcohol with hopes that all higher education systems will adopt SBIRT services as a standard of practice.

- Allison Jones, CSU, Office of the Chancellor, introduced himself.
- Lana Fraser, Department of Rehabilitation, announced the 20<sup>th</sup> Anniversary Celebration of the American Disabilities Act being held July 26-30. A kickoff sponsored by Raley Field will be held at the California State Capitol beginning Monday, July 26, at 9 a.m., with several events scheduled throughout the week. Included in the celebration is a Youth Celebration Forum.
- Jacqueline Duerr, Department of Public Health, called the Council's attention to recent developments regarding child obesity prevention. The Office of the Governor recently announced legislative efforts to address a variety of factors affecting children's health. Ms. Duerr also discussed the Strategic Growth Council, a cabinet-level committee tasked with coordinating the activities of state agencies to improve air and water quality, protect natural resources and agriculture lands, increase availability of affordable housing, and promote public health. The Urban Greening Project, in particular, envisions communities and agencies working together to create options for green space. She added that this project offers the opportunity to form groups to work with kids, provide healthy activities, and encourage alcohol-free behavior.
- **Chief John Rodriguez,** California Highway Patrol, thanked Director Zito for the opportunity to serve on the GPAC.
- **Virginia Clark,** California Conservation Corps, reported they are working on a project with ADP's Office of Applied Research and Analysis on a survey of 1300 people to assess trends and behaviors regarding drug use, gambling, and tobacco; this survey will represent a sample of 18 to 25 year-olds.
- José Phillips, California Conservation Corps, introduced himself.
- Diane Glaser, California Community Colleges, announced that community colleges are committed to implementing SBIRT in their health centers. A two-hour training will be given to community colleges which provides a general overview of SBIRT. To date, some colleges have already engaged in this training and more are scheduled to do so. Three years ago, the Student Community College Health contracted with American Community College Health to survey health-related issues at the community college level. The survey was recently conducted for a second time and provides a more current picture of student health status. The survey included 14 participating California Community Colleges. Results provide a comparison to other colleges nationwide. By the end of the spring 2010 semester, a report on the various issues in community college health and drug use will be presented.

Chief Deputy Director Michael Cunningham made note of the SBIRT training to be discussed later in the meeting. An Alcohol and Other Drug (AOD) webinar will be scheduled in advance of this training to orient participants on the basic principles of

SBIRT so that the training following the webinar will be more efficient in what it hopes to accomplish.

- Betsy Sheldon, California Community Colleges, gave thanks for the ability to conduct trainings on weekends through the California Endowment for Mental Health and Foster Youth Education. An additional focus for the colleges has been on returning veteran students, many of whom are returning from service and using their benefits in Community Colleges. The Office was approached by the Zeller-Rock Foundation to help write a grant to educate faculty and students on Post Traumatic Stress Disorder and Traumatic Brain Injury. The award decision on this grant will be made around the beginning of March 2010.
- Michelle Famula, UC Davis Family Health Center, reported they will be moving into a brand new health facility. This new facility will enable physical health and mental health services to be co-located. The health center has also begun to engage in more administrative collaboration on wellness, recreation, and psychological services. Individuals will be identified to spearhead work around mental wellness. This work will not initially include SBIRT, but the Health Center will be looking at implementing this at the UC level in the future. Currently, the campus conducts similar screenings for every student that uses the services of the Health Center. It is anticipated that more than 50 percent of students will use the services, so a good opportunity exists to do general screening that will help identify who might need additional services.
- Alan Lieberman, Attorney General's Office (AG's Office), recapped the AG's Office
  work regarding litigation on tribal and internet sales of cigarettes. In addition, the AG's
  Office has recently worked with the FDA on alcoholic energy drinks. The basic premise
  is that companies should not be allowed to market products that are not safe. A number
  of states have looked at the issues pertaining to intoxication from alcoholic energy
  drinks and a number of bills have been introduced to ban them.

A flyer on alcoholic energy drinks has been developed by the GPAC Underage Drinking Prevention Workgroup and Council members were strongly urged to post and circulate these flyers. The GPAC Underage Drinking Prevention Workgroup is also developing a website on alcoholic energy drinks, which will be launched soon. This website is very comprehensive, with many links to studies, articles, and general information. Both the flyer and the website will be shared with other states.

Mr. Lieberman expressed interest in obtaining specific data on alcoholic energy drinks possibly using SBIRT and Highway Patrol data.

**Richard Lopes**, AG's Office, stated that although most departments are going through severe cuts, the AG's Office is still committed to prevention. Most recently, Red Ribbon Week activities were held throughout California serving over 900 youth.

Tom Herman, California Department of Education (CDE), reported they are struggling
to maintain their unit as Title Four, Safe and Drug Free Schools and Communities
funding has been eliminated. A bridge grant will soon be released to assist with funding

- Marlena Uhrik, CDE, stated that in the month of May, three statewide conferences will be held. The conferences will offer many joint opportunities, e.g., showcasing schoolbased health centers, healthy start grantees, Student Assistance Programs, and providing resources to children and families in school settings. These three conferences will be held in Los Angeles, Sacramento, and Fresno.
- Cielo Avalos, Department of Mental Health, introduced herself.

## 2. OPENING REMARKS

Director Zito opened the meeting by announcing National Problem Gambling Awareness Week March 7-13. California's efforts during this week include a training summit on problem gambling to be held March 10 and 11 at the Sacramento Red Lion Hotel. The goal of the summit is to provide information on problem gambling prevention education and treatment services to the general public. Friday Night Live will present on youth problem gambling. For more information, call Terri Sue Canale (916) 324-3020.

She announced the next ADP Conference scheduled for June 15-17 at the Sacramento Radisson Hotel has been postponed until October 12-14.

Next, Director Zito announced that The National Institute on Drug Abuse is hosting its eighth Blending Conference in partnership with the University of New Mexico, the University of Arizona, and the University of California, San Francisco. This two-day conference, titled "Blending Addiction Science and Practice: Evidence-Based Treatment and Prevention in Diverse Populations and Settings," will take place April 22-24<sup>th</sup> 2010. For more information, contact Roxanne Kibben at (240) 485-1700, ext. 107.

Finally, Director Zito provided an update on the Prescription Drug Task Force. She stated that Joël Phillips formed a workgroup with representatives from California higher education systems. The workgroup plans to raise awareness about prescription drug misuse. Director Zito encouraged interested parties to talk to Mr. Phillips after the meeting.

### 3. AGENDA AND MATERIAL REVIEW

The following materials were provided to the Council members:

- Information on National Gambling Awareness Week and the First Annual Problem Gambling Training Summit
- A handout from the State Epidemiological Outcomes Workgroup that illustrates current trends to help guide decisions.
- A PowerPoint presentation from Jerry Cartier on SBIRT training in California.
- Copies of two screening instruments that will be referred to in the SBIRT training presentation.
- An agenda for the 14<sup>th</sup> Annual Health Services Association State Conference that notes the continued SBIRT training on Saturday, March 6.

- An article from the San Jose Mercury News on Assemblyman Jim Beall's ongoing efforts towards an increase in the alcohol tax.
- A California-specific toolkit prepared by the Underage Drinking Prevention Workgroup for the 2010 Town Hall Meetings on Underage Drinking which includes a wealth of information on underage drinking.

Director Cunningham provided an overview of the agenda, goals, and topics for discussion.

## 4. ROUNDTABLE DISCUSSION

## 2010 Work Plan

Steve Wirtz, Ph.D., Department of Public Health and State Epidemiological Outcomes Workgroup (SEOW)

Steve Wirtz presented current data on trends in AOD use. The purpose of this data collection process is to assist with the development of a GPAC workplan and to provide data to inform decision-making. The objective of this discussion was to identify key issues that would enhance and improve the state's prevention effort with a broad benefit to GPAC members. Specifically, this presentation was to facilitate discussion on:

- Data sources organizations access to determine need;
- Non-data related factors i.e., politics;
- Relevant findings drawn from the data presented;
- Assumptions the group can make based on key data findings;
- o Alternate conclusions that can be drawn from data; and,
- Workgroup accomplishments and what will continue/cease this year.

Dr. Wirtz began the discussion by bringing the Council's attention to the document, *An Overview of Alcohol and Other Drug Data Sources and Selected Surveillance Data*. This document highlights the need for a comprehensive data-informed decision-making process. Presenting data on drug use/abuse trends is a difficult task to accomplish in a short period of time data covering a wide range of issues. He requested that GPAC members review the information and be prepared to engage in a discussion at a subsequent GPAC meeting.

Dr. Wirtz stated that one difficulty in collecting, interpreting, and applying data is the variability and uniqueness of organizations' missions and mandates. He added that a better place to begin collecting and analyzing available data would be to ask which sources are found to be the most useful in addressing organizational efforts.

Dr Wirtz explained that SBIRT is a great example of driving an effective intervention for a problem in education systems. He added that more common ground needs to be identified to see how all efforts come together at a program and prevention level.

Dr. Wirtz referred the members to a document he distributed and explained that the first page of the document presents available state-level data sources addressing a number of prevention factors, including supply/availability, demand/consumption, risk and protective factors, consequences, and effective interventions.

The last page of the document presents a priority-setting criteria developed by the military for injury prevention. Although these priority-setting criteria center on the concept of injury prevention, they are relevant to the field AOD prevention and can be useful to individual agencies in assessing their efforts.

Specifically, these criteria provide a framework for using data to select priorities. The criteria require that questions must be asked of the data and what they demonstrate: relevancy of a problem, importance of a problem to public health, preventability of the problem, feasibility of a program or policy to combat the problem, timeliness of implementation strategies, and ability to evaluate a program or policy's effectiveness.

He added that SBIRT, as a proven prevention strategy, has demonstrated its effectiveness. It can be used as a tool to quantify decision-making, set standards, and identify behavioral outcomes.

The second part of Dr. Wirtz's presentation focused on member feedback regarding types of data being used in their decision-making process. To begin the discussion, Dr. Wirtz identified data on levels of Oxycontin sales as compared to the rate of deaths due to prescription drug abuse. While recognizing that different data sources have varying ranges of reliability and validity, data on risk and protective factors need to be utilized more effectively in conjunction with consequence and consumption data to obtain a clear picture of various issues and their implications for public health.

Other GPAC members weighed in on this discussion:

- Tom Herman, Department of Education, reported that the California Healthy Kids Survey (CHKS) is essential for determining youth behavior, not only for the department, but also to local communities.
  - Mr. Herman also noted an important overlap in the comprehensive view provided by population-based data collection and the perspective offered by law enforcement agencies and the Highway Patrol data that is collected.
- Dr. Wirtz reported to the Council that The American College Health Survey was not included in the assessment of available state-level data due to its limitations on the number and types of colleges it represents. A request was posed to the Council to provide feedback on how this survey might best be used.
- Diane Glaser, California Community Colleges, stated their office uses the American College Health Survey and will implement it a third time in their colleges. The data collected will show trends and patterns in usage over time. Nationally, this survey compares to four-year schools. With tobacco use, in particular, the data can be used to demonstrate an increase in use in colleges as well as increases in new smokers over the age of 18. This data informed the movement towards not just smoke-free but tobacco-free campuses.

The issue with using data from the American College Health Survey is determining whether to use it college-wide or statewide. Community college students have different patterns of use. This is because community college cohorts are larger, generally older,

and are often more transient. One valuable use of information from the survey is in determining trends in adult immunizations and vaccinations. The data are used to inform decisions regarding specific populations within colleges, but not necessarily comparing one college's population with that of another college. Some surveys, with joint effort and collaboration, can add modules and questions to inform informational gaps.

The recent move to maintaining electronic medical records has made more information available for analytic purposes. While data is not comparable campus to campus, more benchmarking for screenings are being conducted that will allow comparisons within and among colleges. For instance, Midwest schools as compared to Southern schools vary in drug use trends and availability.

- Lt. Col. Peter Shaner, California National Guard, stated the priority concern for data use in the military is to work towards demand reduction. Support from members of the prevention field as well addiction services, especially in the southern region of California (the border alliance), use data on illicit drug use, manufacture, and transportation. This information is useful in directing prevention efforts. High-intensity drug trafficking data can assist in identifying new patterns of drug surveillance and serve as early warning systems. Within the military, Family Resource Centers usually have decent data procedures in place.
- Rick Lopes, AG's Office, reported that some data tools used by the AG's Office include the Western States Information Network (WSIN) which collects local and national data on trends concerning use and prices. He noted that interdiction or prevention success often result in price increases on the street. For example, successful targeting of a large cocaine cartel causes a shift to meth use, resulting in an increase in methamphetamine sales. The key to sustained prevention is legislation. Data is entered into the WSIN systems to measure the AG's Office success rates and to identify trends. This data has not been accessed by other agencies to indicate which trends may be entering certain areas and to determine prevention efforts that should be implemented to combat their spread.
- Alan Lieberman, AG's Office, added that the Attorney General's Office often relies on peer-reviewed studies. For example, regarding the office's work on banning the sales of alcoholic energy drinks, the AG's Office used various studies that demonstrated data showing higher rates of driving under the influence, sexual assaults, etc. associated with their use. Effective legislative advocacy needs these focused studies that allow issues to be framed in realistic and relevant terms and not just be seen by legislators as "numbers". Anecdotal information from one or two instances from specific agencies and organizations that work with particular populations, as well as stories from the general public is helpful in illustrating patterns and consequences of use. Surveillance systems should include early warning signs and agencies and organizations need to learn to use the data effectively.
- Joël Phillips of EMT Associates, Inc. concurred with Mr. Lieberman on the importance of including relevant research studies in formulating public AOD policies, and provided examples of drinking rates as interpreted by different datasets.

• Michelle Famula, UC Davis Family Health Center, stated that while there is much information on a variety of measures, the ultimate question should be, "Which measures are the most relevant?" The numbers and data should be identified in a way that may be more meaningful for organizations. All too often, studies seem to focus on areas that are too general and don't have significant and impactful meaning. Measures of polydrug use, multiple drug use and alcohol use patterns can be indicators of social and public health problem behaviors, but without identifying an effective solution, these numbers can be somewhat meaningless. For the UC Davis Family Health Center, data on health disparities drives program planning. Data collection and surveillance should focus on sub-populations and how they are affected differentially by some of the same health concerns.

Michael Cunningham addressed the Council to determine the best way to effectively use the Council's time discussing these epidemiological issues. Mr. Cunningham suggested members read the handouts and that Dr. Wirtz will be asked to return to discuss their findings.

Dr. Wirtz stated that agencies may be asked for a contact representative to help the Department identify sources of data and information that might be most useful.

A few examples were provided by Dr. Wirtz of how GPAC has helped inform data collection. There are many active participants in this effort to improve the Department's overall access to data. The United States Attorney General, Highway Patrol, Alcoholic Beverage Control, and the California Department of Education assisted in the collection of traffic fatality and injury data related to alcohol consumption. The SEOW is the primary vehicle to help streamline efforts within ADP. Death statistics, hospitalization data, and Department of Education data has been used to quantify and identify trends.

GPAC has also been used to present information to its members. The Prescription Drug Misuse Task Force and the SEOW partnered to identify advocates to fund efforts around the SAMHSA SEOW project.

Michael Cunningham stated the Council will begin working on a process to identify important pieces and to get to the core of priorities. The goal is not to create another workgroup, but to attempt to work as efficiently as possible in the time available while still making good decisions.

## 5. COUNCIL WORKGROUP UPDATES

## <u>California Screening, Brief Intervention, and Referral to Treatment (CASBIRT)</u> Subcommittee

Workgroup Update
Michael Cunningham, ADP

In sharing recent data, Michael Cunningham stated the most notable achievement to date is that targets for screening will be exceeded. The goal was set at 120,000. So far, 114,000 people have been screened and the goal of 120,000 will be achieved within the

next few weeks.

San Diego County has been engaged in sustaining efforts within the County. They have experimented with the use of student interns to conduct screenings. This situation benefits students as well as colleges. Students gain experience and are available during late nights and weekends when trauma units and Emergency Departments can utilize screening services.

In Los Angeles County, the population is much different. Los Angeles focuses on both city and county jail detainees who are detained for a maximum of 96 hours. The process is presenting unique challenges so the goal of screening 6,000 detainees will not be met. This is due to two reasons: 1) although screenings are conducted on-site, there is a need for full-time screeners and the "person power" to do so is not available; and, 2) the structure of the screening does not allow full screenings to be conducted on site. Incentives are offered to individuals to visit another site once they leave jail to receive a full screening, but even with the incentive, this population tends to have other priorities. Some unique ideas have been proposed to address this matter.

Data from screenings that have been conducted to date indicate that, as anticipated, there are differences in risk levels of short-term detainees and the San Diego project. The vast majority of individuals in the San Diego project screen into the low risk category, with 20 percent screening as "at risk," and five percent screening as "high risk". These findings are opposite with individuals from the Los Angeles project.

Mr. Cunningham went on to explain that there is very limited data at the six month followup. Due to the small numbers, screening and brief intervention are equally effective tools for both populations, both in reducing AOD use and improving living situations, as well as other areas of need. The results are positive and confirm that improvements due to BI are not unique to any one population. More data will be made available at the next Council meeting.

Finally, Mr. Cunningham spoke about upcoming SBIRT trainings and referred to the trainings handout in the members' folders.

## **SBIRT Training Update**

Jerry Cartier, University of California at Los Angeles (UCLA) Integrated Substance Abuse Programs

Jerry Cartier presented data on specific areas of data collection including project and dissemination numbers and reported there are many populations and venues where SBIRT can be implemented. Mr. Cartier provided a walkthrough of important data contained in his presentation.

The data collection process consists of uploaded electronic assists that are loaded onto individual computers, each with a unique disk with a separate series of anonymous identification numbers. Some computers are mobile, while others are located in designated facilities.

Ms. Famula, UC Davis Family Health Center, asked if the computer-based program used at UCLA was tied to Electronic Medical Records (EMR) or if it was a separate system; Mr. Cartier stated that it is a separate system.

# **Evidence-Based Practices Workgroup Christina Borbely, Community Prevention Initiative**

Ms. Borbely provided an update on the Evidence-Based Practice (EBP) Workgroup. A Summary Report of Phase 1 findings was drafted in July 2008. The question the workgroup aimed to address was, "What does EBP look like at member agencies?" This inquiry broadened the definition to include research, evidence, and data-informed strategies. Phase 1 provided a profile of the information collected and demonstrated there is quite a range of agencies who have no use for EBP, while some have a robust demonstration of integrating policies, practices, and research.

Phase 2 included an effort to gain information on what EBP does or does not look like. The method for Phase 2 utilized a point of interest document tied to conversation to allow agencies to contribute information by phone or email to be included in a formal report. Phase 2 included responses from six agencies. Responses that were provided included some interesting aspects such as the need for flexibility and customization. Another reported need was for key partners to commit to evidence-based practices and to get key stakeholders on board with implementing EBP. Phase 2 has also included a review of available literature and case studies and documenting successes between like agencies. One relevant need is for formalizing EBP at the institution level, such as building it into strategic plan. One idea is that having a local champion is instrumental in driving it forward at institutions. Reports on both phases are available.

Next steps could include role model agencies serving as informants, or examining other states' approaches for a unified message.

Director Cunningham stated that as the Council moves forward with looking at and making data-informed decisions, proven feasibility and reasonability can be gleaned from these reports.

Dr. Wirtz stated it would be interesting to explore the possibility of making this information available to more agencies. A member cautioned about loosing the validity of EBP through excessive flexibility and innovation.

## <u>Underage Drinking Prevention Workgroup</u> Jamie Taylor, ABC

The Underage Drinking Prevention Workgroup (Workgroup) has created a number of educational tools which have been distributed to DMV and Police Departments.

One of the Workgroup's priorities is to support the 2010 Town Hall Meetings process which involves scheduling a meeting for community members to discuss issues related to underage drinking, how it affects their community, and what can be done about the problem. These meetings are youth-led and are supported by SAMHSA. A packet was

developed by the Workgroup to prepare people to hold Town Hall Meetings in their communities. Included in the meeting materials is a sample packet.

Jim Kooler, California Friday Night Live Partnership, commented that Town Hall Meetings are intended to be a catalyst for ongoing activities, not just an isolated activity. Having youth involved in holding these types of meetings is a critical aspect. To date, over 100 organizations have signed up to host a Town Hall Meeting.

## <u>High Rate Underage Users Workgroup</u> Tom Herman, CDE

The Department of Education has published and posted 14 Student Assistance Program bulletins. The Department is interested in applying for grants that look at school climate issues that contribute to efforts towards a positive environment. Data collection is focusing on California Healthy Kids Survey implementation and high use rates among youth. Due to recent changes in budget and staffing there has been a change in personnel and some of the Department's efforts have been on hold. Stephanie Papas will provide support for the High Rate Underage Users Workgroup.

## 6. OTHER ANNOUNCEMENTS

Director Zito asked if the Council was interested in hearing a presentation on services for returning veterans. The Council approved a presentation on the Troops to College Program.

## 7. SUMMARY/CLOSING

Director Zito thanked Council members and guests for attending. The next GPAC meeting is scheduled for May 20, 2010.

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Organization / Task	Appointed Members	February 25
1 ADP Policy	Renée Zito	Р
Tech	Michael Cunningham	P
2 AG Policy	Richard Lopes	P
Tech	Alan Lieberman	Р
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3 CDE Policy Tech	Gordon Jackson Tom Herman	A P
	· om rooman	·
4 OTS Policy	Chris Murphy	A
Tech	Leslie Witten-Rood	A
5 UC Policy	Judy Sakaki	Р
Tech	Michelle Famula, M.D.	Р
	Representative: Jerlena Griffin-Desta	
6 CSU Policy	Allison Jones	P
Tech	Paul Oliaro	Р
	Representative: Ray Murrillo	
7 ABC Policy	Steve Hardy	A
Tech	Christian Albrecht	P
	Representative: Jaime Taylor	Р
8 DPH Policy	Linda Rudolph, M.D.	A
Tech	Mary Strode	P
	Representative: Jacquolyn Duerr	P
9 CalEma Policy	Scott Frizzie	A
Tech	Wendy Tully	A
10 CA Com Coll Policy Tech	Jeff Spano	A
	Diane Glaser (new member as of 1/10)  Representative: Betsy Sheldon	<u>Р</u> Р
	representative. Bets) shelden	
11 DSS Policy	Linne Stout	A
Tech	Debbie Wender	A
12 CHP Policy	Jon Rodriguez (new member as of 2/10)	Р
Tech	Robert Maynard	A
13 DOR Policy	Lana Fraser	P
Tech	Cheryl Grimm	A
	Representative: Ruby Lim	
14 DMU Dollov	Vacant	٨
14 DMH Policy Tech	Cielo Avalos	A P
15 CA Natl Guard Policy	Lt. Col. Peter Shaner	Р
Tech	SSG J'Neen Rice	A
16 CCC Policy	Virginia Clark	Р
Tech	Jose Phillips	Р
Gov's Rep (OPR)	Cynthia Bryant	٨
OUV 3 NEW (UFR)	Representative: Brook Taylor	A A

# GOVERNOR'S INTERAGENCY COORDINATING COUNCIL FOR THE PREVENTION OF ALCOHOL AND OTHER DRUG PROBLEMS

GOVERNOR'S PREVENTION ADVISORY COUNCIL (GPAC)
February 25, 2010 – 9:30 a.m. to 12:30 p.m.
Department of Alcohol and Drug Programs
1700 K Street, First Floor Conference Room
Sacramento, California 95811

## **AGENDA**

## **OPENING**

1. Introductions/Announcements - Renée Zito/All

9:30 a.m.

- 2. Opening Remarks Renée Zito
- 3. Agenda/Material Review Michael Cunningham

## **ROUNDTABLE DISCUSSION**

- 4. 2010 Work Plan
  - -Data Overview Steve Wirtz, Department of Public Health State Epidemiological Outcomes Workgroup

- BREAK -

## **COUNCIL WORKGROUPS**

- 5. California Screening, Brief Intervention, Referral, and Treatment (CASBIRT) Program Subcommittee
  - Workgroup Update Michael Cunningham
  - SBIRT Training Jerry Cartier, M.A., UCLA Integrated Substance Abuse Programs
- 6. Evidence-Based Practices Workgroup Dr. Christina Borbely,
  Prevention Specialist, Center for Applied Research Solutions
- 7. Underage Drinking Prevention Workgroup Jaime Taylor, Alcoholic Beverage Control
- 8. High Rate Underage Users Workgroup Tom Herman, California Department of Education

#### **OTHER ANNOUNCEMENTS**

9. Request for Approval of Future Presentations

SUMMARY/CLOSING – Renée Zito

12:30 p.m.

THE NEXT MEETING IS TENTATIVELY SCHEDULED FOR MAY 20, 2010.